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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/586,105		Filing Date 07/14/2006		To be Mailed
_											HER THAN ALL ENTITY
FOR			NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A		1	N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A		N/A			N/A	
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A		N/A			N/A	
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		*		X \$ =		OR	X \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		*		X \$ =		•	X \$ =	
_	APPLICATION SIZE (37 CFR 1.16(s))	she is \$	ets of pap 250 (\$125 itional 50	wings exceed 100 cation size fee due tity) for each ction thereof. See 37 CFR 1.16(s).							
	MULTIPLE DEPEN	IDENT CLAIM P	RESENT (3	7 CFR 1.16(j))							
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	05/06/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 16	Minus	** 20	= 0		X \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	* 3	Minus	***3	= 0		X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
ENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOF	R PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	*	Minus	**	=		X \$ =		OR	X \$ =	
	Independent (37 CFR 1.16(h))	*	Minus	ole ole ole			X \$ =		OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))										
AMI	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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